STATE OF TENNESSEE
COUNCIL ON CHILDREN'S MENTAL HEALTH
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Council on Children's Mental Health
December 8, 2011
10 a.m. – 3 p.m.
First Unitarian Universalist Church

Attendee List:

Mark Baldwin
Sumita Banerjee
Kathy Benedetto
Bonnie Beneke
Susanne Bennett
Rod Bragg
Shawn Brooks
Pam Brown
Charlotte Bryson
Stephanie Chadwell
Nicole Cobb
Gail Crawford
Michele A. Daniel
Mary Jane Dewey
Katarina Donaldson

Carol Dunaway
Emel Eff
Kathy Gracey
Vickie Harden
Robbie Hutchens
Jeanne James
Joan Jenkins
Dustin Keller
Richard Kennedy
Bill Latimer
Shelley Martin
James Martin
Nneka Norman-Gordon
Linda O'Neal
Steve Petty

Dawn Puster
Jeff Puster
Scott Ridgway
Anne Robertson
Kathy Rodgers
Mary Rolando
John Rust
Elliott Sparks
Sukey Steckel
Sarah Suiter
Millie Sweeney
Pat Wade
Alysia Williams
Lygia Williams

MEETING SUMMARY

Welcome and Introductions (Linda O'Neal and Rod Bragg)
- O'Neal welcomed participants and thanked them for their contribution in the preceding workgroup meetings. She directed the group to the CCMH Meeting Dates for 2012 listed at the bottom of the agenda. There is not a meeting date for December 2012 because it was challenging to find a date, but a meeting will be scheduled in December if necessary.

- O'Neal also noted each table has a laminated copy of the System of Care (SOC) core values and guiding principles following a recommendation by the collaboration and adoption workgroup.
- Bragg explained TDMH is moving to the Andrew Johnson Tower and Commissioner Varney regrets being unable to attend the meeting, but is currently moving his own office. Bragg expressed his appreciation for the work of the Council and is excited to have the opportunity to participate in the meeting.

Acceptance of Meeting Summaries (O'Neal)
- August 25, 2011 Meeting Summary Acceptance **(SWEENEY MOTION, BENEKE SECOND, UNANIMOUS).**
- October 19, 2011 Meeting Summary Acceptance **(ROLANDO MOTION, GRACEY SECOND, UNANIMOUS).**

Workgroup Reports (Workgroup Co-Chairs)
- MIS/Accountability - Brown (Co-Chair) reported the group reviewed survey results. There have been 34 responses. The responders included parents and representatives from the education system. However, there have not been any responses from health care service providers, people who work in juvenile justice or managed care organizations. The group is currently trying to identify groups to have better representation of a broad range of disciplines. The group will report on survey results after collecting additional responses.
- Collaboration and Adoption – Hardin (Co-Chair) reported the group is exploring an agency specific instrument to measure an organization's ability to operate under System of Care values and principles. There are many system evaluation instruments available, but the group wants something specifically for agencies to evaluate their current adoption and use of SOC ideas. The group would also like TCCY to put a link to the resources on the CCMH webpage.
- Community Outreach and Awareness – Sweeney (Co-Chair) reported the group would like to adopt a universal fact sheet with definitions, so everyone is using and understands the same language and terms. The workgroup would like this sheet included as part of report to legislature. The workgroup is also considering how to share the terms/language and starting to build a toolkit with fact sheets and SOC specific training(s).
- Financing Strategies – Norman-Gordon (Co-Chair) reported the group would like to identify additional people to participate in the workgroup and will make the request. The workgroup discussed extent to which system of care fits into the Managed Care Organizations' (MCOs) level of care. The group would like to put together a presentation for the MCO's on wraparound and how it can integrate into their services and the resulting savings for MCOs.

- Service Capacity & Readiness – Rodgers (Co-Chair) reported the group focused on readiness. How do we know when a community is ready to integrate SOC. The group discussed different community readiness assessments and is currently leaning toward the Behar assessment as it has additional specific information and more appropriate for Tennessee.

Statewide Planning Grant for Children and Youth with Autism Overview (Carol Westlake)
Refer to PowerPoint, "Tennessee Autism Planning Project"
- O'Neal introduced Westlake from the Disabilities Coalition and explained the recent awarding of federal funding to develop a statewide plan for children and youth diagnosed with autism and related diagnoses.
- Westlake noted the similarities between the statewide autism project and the goals of the Council's statewide system of care planning.
- This planning grant runs from September 2011-August 2013. Westlake anticipates working toward applying for an implementation grant following the completion of the planning grant cycle.

TennCare Healthcare Effectiveness Data Information Set (HEDIS) Data Overview and Budget Update (Dr. Jeanne James)
Refer to PowerPoint, "Health Care Finance and Administration FY 2013 Proposed Budget Presentation"
- James reported Tennessee has seen improvements in all child health measures according to the HEDIS data available.
- Rolando commented it is great to see Tennessee move up in key health areas and in health rankings at same time.
- James stated TennCare has recently started obesity prevention and counseling for children a year ago. There are techniques and concepts from mental health such as recovery, resiliency and motivational interviewing that could be useful in obesity and related issues.
- James discussed TennCare's proposed budget submission to Governor Haslam including reducing items to meet a five percent budget cut.
- Because of the success of managed care in our state to control costs, other states and national organizations have started asking for technical assistance and made site visits to learn about the structure in Tennessee.
- James explained the state still anticipates receiving additional federal funding from a settlement related to social security disability. This information was discussed in last year's and this year's budget hearing.
- As TennCare is limited in the ways they can reduce spending, James reported an 8.5 percent cut is proposed for Mental Health providers in addition to a 1.5 percent cut to all providers for a total for ten percent.

Early Connections Network (ECN) Community Connections Overview (Susan Steckel)

- Steckel stated ECN is Tennessee's first attempt at a regional system of care. There will be an identical amount of funding for the five counties (Cheatham, Dickson, Montgomery, Robertson and Sumner) to be served as what has traditionally been spent on one county. The overall framework and focus of the grant funding will have to be adjusted.
- The project is currently focused on workforce development and hiring project staff. A release of funding announcement will be available on Department of Mental Health website soon.
- The project recently hosted a regional community partners meeting and 80 people attended demonstrating support for increased collaboration and services.

ECN Needs and Strengths Assessment Report (Dr. Sarah Suiter)

Refer to PowerPoint, "ECN Needs Assessment"

- Dr. Suiter stated ECN is a six-year grant and is currently in its initial planning year.
- The needs assessment involved 20 focus groups with over 129 participants. The groups included a good mix of families and service providers from all five counties. Families were infused at all levels of the process.
- The assessment also included a resource mapping process. The process systematically used methods families would use to be able to learn of available services, including internet, phone books, directories and relationships. An excel spreadsheet of the services map is available.
- Rolando asked if home visitation services were included in available resources. Suiter responded only services available at a building or provider office were included in the resource map.
- During the regional community partners meeting, groups participated in concept mapping and the information will be used to begin to build a foundation for the project.
- Steckel asked about the lessons learned from the assessment process. Suiter responded having family members involved and providing input from the start was very important. She also stated having additional time for the focus groups would have been beneficial. She recommended using existing meetings or groups available. Surveys can be very effective if you have a way to make them available and can track who is responding to them.

Tennessee Lives Count (TLC) (Lygia Williams)

Refer to PowerPoint, "Shield of Care Overview for Action Alliance"

- TLC is currently in its third federal grant cycle. The first grant focused on broad-based suicide prevention gatekeeper training and the second was based on the juvenile justice system.

- A collaborative project was developed after the first round of grants. Williams encouraged participants to look at the website and provide feedback. www.gatekeeperaction.org
- TLC III grant is newest award and is multi-faceted but focuses on an intensive follow-up of youth who have been suicidal recently. Additional aspects focus on institutionalizing change in colleges and universities and providing postvention services to schools after a student has died by suicide.

Discussion Plans for Future Meetings/Announcements (O'Neal)
- Next meeting is scheduled for February 23, 2012.
- Future meeting topics discussed included: overview of school climate center, HEDIS data follow-up, additional work on the pending report to the legislature, updates from the four System of Care initiatives, and a legislative update.
- Tennessee Association of Mental Health Organizations' (TAMHO) Conference is scheduled for next week (12/12 – 12/13).
- Ridgway reported Department of Health released statistics for suicide. There was a decline in the number of suicides in 10-19 year olds. TSPN's Status of suicide report will come out in a few weeks.
- Dewey shared health information on Tennessee is available on the web at hit.state.tn.us
- Bragg reported the Department of Mental Health is in the process of training all currently funded alcohol and drug abuse treatment centers to be co-occurring treatment centers for both substance abuse and mental health.